File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form

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FOR INSTRUCTIONS, SEE BACK OF FORM

	DISCLOSURE	SUMMARY PAGE	200	09 JAN 20 PM 1:56
COMMITTEE NAME (Must b	e same as on Statement of Orga	nization) CENTAGL	٦ [	-> 0W 50 111 (- 10
POTTAWATTAME	COUNTY DEMICA	ATIC COMMITTEE		FORM
(1)Statewide/Legislative/Judge (4)County Central Committee (5)Subdivision Candidate (8)County Central Committee (1)	or committee you are reporting for:   Standing for Retention Candidate ( 2 5 )County Candidate ( 6 )City Candid	<b>.</b>		DR-2 DISCLOSURE REPORT  For Office Use Only
11 ) Local Ballot Issue			<u></u> ∐	Comm. #
CANDIDATE COMMITTEES Candidate Name	ONLY:	Political Party (if applicable)		Logged In Scanned Computer
Office Sought		District (if Senate or House)		Audited
Late reports are subject to possi	ne Tressur	2/2 - 435 - 9767 TELEPHONE	7) and 6	68A.401(3), the candidate, for a                                DATE SIGNED
I AM FILING A _/0/15/08 -	- 12/31/08	REPORT FOR (1) ELECTION /(	2\NON	N ELECTION VEAD
·	eport date)	Indicate by #		1-ELECTION TEAR.
CHECK IF AMENDMENT TO	•	maicate by #	<u></u>	
	ONLFORT DATED		ocal Co	mmittees, enter Date of Election
Check if this is final (termina (You must continue to	ation) report and attach Notice of of file reports until a DR-3 is filed.	۱۰ ا		Local Committees, enter County in ection is held
STATEM	ENT OF CASH ON HAND			
CASH ON HAND at the beginn committee. This amo of the last reporting p	ing of the reporting period. (Tota unt <b>MUST</b> be the same as the ca eriod or must be zero if this is firs	al of all funds held by the ash on hand at the end st report filed.)	\$	3 0 65.54
ADD TOTAL MONEY	TAKEN IN THIS PERIOD			
Schedule A: Cash Co	ontributions total (Attach Schedu	le A) (*also see in-kind below)		1.105.00
		·)		
		h Schedule H)		
(Schedule H	applies to Candidates' Comm	ittees Only) SUB-TOTAL	\$	¥ 4,170,5
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD			
Schedule B: Expendi	tures total (Attach Schedule B) (	**aiso see debts and loans below)		
Schedule F: Loan Re	payments total (Attach Schedule	F)		
CASH ON HAND at the end of	this reporting period (if final repo	rt balance must be zero)	\$	2,400.31
*UNPAID BILLS (From Sched	ule D - Attach Schedule D)		\$	
IN KIND CONTRIBUTIONS (F	rom Schedule E - Attach Schedu	ıle E)	\$	
*OUTSTANDING LOANS (Fro	m Schedule F - Attach Schedule	F)	\$	
CONSULTANT BREAKDOWN			•	YES NO
ANDIDATE COMMITTEES O	· ·		_	
ALUE OF CAMPAIGN PROP	ERTY (From Schedule H - Attac	h Schedule H)	\$	
		bank statement in January of each y		
	· -			

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### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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SCHEDULE A (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF

COMMITTEE NAME (Must be same as on Stat	ement of Organization)	CENTRAL	
FOTTAWATTAMIE COYPT	DEMICATION	Comm-7766	L

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISEF INCOM
io [15] o 8	CK#	SMITAINING CLAB EMILY SME LETT 1000 NO 26 TH ST 1000 NO 26 TH ST 1000 NO 26 BUTES IA 51501		\$ 5.00	
c/15/08	ID# CK#	STATATATA CLUB ED BARMATA AVE 1232 FARMATA AVE 1232 FARMATA TA 51503		10.00	
0/15/08	ID# CK#	STAINE CLOB JEAN HANTWELL 19806 I 90 TH ST Mc Cleusno IA 5/548		10.00	
6/15/08 6/15/08 6/15/08	ID# CK#	SUS TAIR IN CLUB SANDAR + DEFFREY SMITH 512 RIDGE ROSO WIST CONNECL BLAPPY, ZA 5/503		25.00	
1/15/08	ID# CK#	SASTAINE CLAB  TRADY & RUSIEU Zew Men  21693 270 TH ST  MUCLEULAMS, IA 51548		10.00	
0/15/08	CK#	SASTAINING CLAS SAE AKEAS SAE AKEAS SAURUR RO DOMNOCIL BUTETS IA 5/503		25.00	
	ID#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
		TOTAL (If last page	SUB-TOTAL	\$85.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of 3 (for Schedule A)

For Instructions, See Back of	of	Form
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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF

COMMITTEE NAME (Must be s	ame as on Statem	ent of Organization)	CENTHAL
POTTAWATT AMIE	Cayory	DEMICATTO	Comma7766

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DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	SMITAINING CLAB EMILY SHE LETT		s	
11/15/08	CK#	1000 N. 26 TH ST Con real Bush TA 5/50/		5.00	<u> </u>
	ID#	SULTAINING CLAB			
11/15/08	CK#	1232 FARMING AVE CONNEL BLAPF, ID 51503		10.00	<u> </u>
	ID#	ISASTAININ CLAS			
11/15/08	CK#	Jego HONTWELL 1986 290 TH ST Mc Ceusno, IA 51548		10.00	
	ID#	CU ( TA: P: Pl / ) . R			
11/15/08 11/15/08	CK#	SANDAR & DEFFAR, SMITH 522 RIDGE ROSO WIST COUNCIL BLAPT, ID 5/503		25.00	
	ID#	SASTA: MING CLAB			
11/15/08	CK#	Many & Russen Zew Men 21693 270 TH ST Mechans IA 51548		10.00	
	ID#	18157A:00 CL18			
11/15/08	CK#	SIE BYENS FICKU RO 20 401 HONEL BLUFFS TA 5/503		25,00	<u> </u>
	ID#	CITIZENS FOR HANKIN			<del></del>
11/15/08	CK#	DEI MOINE IA		500.00	
	ID#	CHICK SMAH			
1/29/08	CK#	CHYCK SMITH 25 HORIZON ORIVE CONNEL BLAFFI, IA 51503		200.00	
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	28500	

TOTAL (If last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See E	Back of Form	
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### **CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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•				CHE
COMMITTEE NAME (Must be s	ame as on Statem	ent of Organization)	CENTRAL	AME
POTTAWATTAMIE	Cayery	DEMICRATIC	Comm-7766	<u> </u>

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/15/08	ID# CK#	SAITAINING CLAB EMILY SAE LETT 1000 NO 26 TH ST 1000 NO L BUTTES IA 5/50/		\$ 5.00	
12/15/08	ID# CK#	SHITATION CLUB  ED BREMMERT BUE  1232 FARMULT BUE  CONNEL BUITES ID 51503		10.00	
12/15/08	ID# CK#	STAINER CLOS JEAN HANTWOLL 19806 290 TH ST Mc COURSO, DA 5/548		10.00	
12/15/08	ID# CK#	SAS TAIN IN CLUB SANDAR + DEPPRES SMITH 521 RIDGE READ WIST COUNCIL BLAPPS, ZA 5/503		25.00	
12/15/08	ID# CK#	SASTA: MINE CLAB  TRASJ & RASJEW ZELUMEN  21693 270 TH ST  MCCLUMANS, IA 5/548		10.00	
12/15/08	ID# CK#	SASTAINE CLAS SAE AKENS SA		25,00	
1-131/08	ID# CK#	UDIO CHEUN H 1022 TA WEITEN EL COMPUL BLAFFI TA		150.00	
	ID# CK#	B-111, D			
	ID# CK#				
:	ID# CK#				
			SUB-TOTAL	.32=01	

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC AME	CK THIS BOX IF

COMMITTEE NAME (Must be	e same as on Sta	tement of Organization)	
POTTAWBITAMIE			CENTRAL

1 POTTA	WATTAMIE	Cunas.	DER THIS	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1 1	CHECK NUMBER ID#	BETH WILLOW	REIMBUDIOMENT	10.0
0/23/08	CK# <b>4*</b> #	Connac Blapfy 20 51503	The DA (TAGE	\$ 10.80
10/25/0r		Q 4 E S 7 P 0 B 0 X 9/15 4 SEATTHE WA 9/11 63	PHONE PON SENVICE PON SY PANTY HEADONANTH	
	ID#	SEATTLE WA 98111-92	1 PANTY HEBOWABATH	1 326.8
10/25/08	CK#	M: DAMBRICAN ENEMAY PO BOX JOZO DAVENPONT TA 52808-602	ELECTIC 4TILITIES	
	ID#		1/11/19/24/90/11/1	101.80
0/31/08	CK#	BAULTHI BANK 1751 MADJON ANC OBTA	ANTOMATED CLIARING- HUNK FER 5 51503	10,00
	ID#		7 3 7 3 3	10.00
JI	CK#	11	SENULCE CHANGE	2 40
	ID#	(Ca) C ( 10-		2.00
123/08	CK#	LMily SUE LETT 1020 N 26THST	REIMBUNKMENT TON OFFICE SUPPLIES	2//-
	ID#	CUINCI BUSEL IASV	5./	26/30
	·υπ	CONNEL BLAFFS	RE-M. OF ZA	<del>                                     </del>
16/08	CK#	COMMON BLIFF! IA JISO	14-6H FUR	43/.00
	ID#			02
17/08	CK#	COPY CAT PRINTING 225 N BRODOWAY IT COMMON BLAFFI TA	MONTHLY REPORTS	16.78
		, 20 h		\$ 1243.65

TOTAL (if last page of this schedule)

\$ 1243,65 \$

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHECK THIS BOX IF AMENDING FORM	

COMMITTE	EE NAME (Must be	same as on Statement of Organization)		
PUTTA	WOTTAMIE	COUNTY DEMOCRATIC	CENTRAL	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/30/08		MID BAKA: CAR ENEAGY PO BOX POZO DAVENDO1T JA SXOK-GO.	FOR PARTY HEAD GRANTER	\$ /34.84
11/30/08	ID# CK#	COTNEIL BLAFF!	(ERVICE	134.01
///3·// ¢	ID#	CONNECT BROKES TA SIS	13 ClfAn6E	3. 22
12/1/08	CK#	535 W. BRUDOWAY (TEA	300 DAHELENTERS	360.00
D-11/08	ID# CK#	CONNUL BLUTTI	AntomATEd	
	ID#	1851 MAD-10- 146 CONNUL BUFF, IA 5/50	By To MATER PPE	10.00
1431/08	CK#	// //	Outen De of	1000
12/3/106	ID# CK#	/ı /ı	SENVICE CHANGE 12/08	5.97
	ID# CK#		1-1-	
	ID# CK#			
			SUB-TOTAL	\$ 524.58
			TOTAL (if last page of this schedule)	\$ 122- 23

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

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